

DOCKET NO: 275917US-6X CONT

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

IN RE APPLICATION OF :  
MAKOTO KAWAMURA, ET AL. : EXAMINER: ROBERT CHEVALIER  
SERIAL NO: 09/938,252 :  
FILED: AUGUST 23, 2001 : GROUP ART UNIT: 2621  
FOR: INFORMATION CARRIER, :  
DEVICE FOR READING AND DEVICE  
FOR PROVIDING THE INFORMATION  
CARRIER...

RESPONSE TO NOTICE REGARDING POWER OF ATTORNEY


COMMISSIONER FOR PATENTS  
ALEXANDRIA, VIRGINIA 22313

SIR:

In response to the Notice Regarding Power of Attorney dated February 28, 2007,  
Applicants' attorney submits the attached Case Specific Power of Attorney where Multiple  
Assignees are Present signed by the inventors. Applicants' attorney believes that the filing of  
these signed Powers fulfills the requirements to grant Power of Attorney to Applicants'  
Attorneys associated with Customer Number **22850**.

Respectfully submitted,

OBLON, SPIVAK, McCLELLAND,  
MAIER & NEUSTADT, P.C.



Bradley D. Lytle  
Attorney of Record  
Registration No. 40,073  
Surinder Sachar  
Registration No. 34,423


Customer Number

**22850**

Tel: (703) 413-3000  
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(OSMMN 06/04)

**CASE SPECIFIC POWER OF ATTORNEY WHERE MULTIPLE ASSIGNEES  
ARE PRESENT OR IF THERE IS NO ASSIGNEE**

<p align="center"><b>POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM</b></p>	Application Number	09/938,252
	Filing Date	August 23, 2001
	First Named Inventor	Makoto KAWAMURA, et al.
	Title:	INFORMATION CARRIER, DEVICE FOR READING AND DEVICE FOR PROVIDING THE INFORMATION CARRIER AND METHOD OF TRANSMITTING PICTURE INFORMATION
	Attorney Docket Number:	275917US6X CONT

I hereby appoint:	
<input type="checkbox"/> Practitioners associated with the Customer Number	22850
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.	
Please recognize or change the correspondence address for the above-identified application to:	
<input type="checkbox"/> The address associated with the above-mentioned Customer Number.	
I am the:	
<input type="checkbox"/> Inventor.	
<b>SIGNATURE OF INVENTOR</b>	
Signature	
Name	Makoto Kawamura
Telephone	81-3-5435-3910
Date	October 21, 2005
* NOTE: Signatures of all the inventors are required. Total of <u>2</u> forms are submitted.	

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OR IF THERE IS NO ASSIGNEE**

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Please recognize or change the correspondence address for the above-identified application to:	
<input checked="" type="checkbox"/> The address associated with the above-mentioned Customer Number.	
I am the:	
<input checked="" type="checkbox"/> Inventor.	
<b>SIGNATURE OF INVENTOR</b>	
Signature	<i>Yasushi Fujinami</i>
Name	Yasushi Fujinami
Telephone	81-3-5435-3910
Date	<i>October 24, 2005</i>
* NOTE: Signatures of all the inventors are required. Total of <u>2</u> forms are submitted.	

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I am the:	
<input type="checkbox"/> Inventor.	
<b>SIGNATURE OF INVENTOR</b>	
Signature	Wiebe de Haan 
Name	Wiebe de Haan Telephone +31402734976
Date	2007-02-26
* NOTE: Signatures of all the inventors are required. Total of <u>1</u> forms are submitted.	

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